

CALIFORNIA UNIFIED CERTIFICATION PROGRAM (CUCP)



Dear Business Owner:

Thank you for your interest in participating in the California Unified Certification Program (CUCP) for Disadvantaged Business Enterprises (DBEs). As mandated by the United States Department of Transportation (U.S. DOT) in the DBE Program, Final Rule 49 Code of Federal Regulations (CFR), Part 26, all U.S. DOT recipients of federal financial assistance must participate in a statewide UCP by March 2002. The UCP is a "One-Stop Shopping" certification procedure that eliminates the need for DBE firms to obtain certifications from multiple agencies within the State.

The CUCP is charged with the responsibility of certifying firms and compiling and maintaining the Database of certified DBEs for U.S. DOT grantees in California, pursuant to 49 CFR Part 26. The Database is intended to expand the use of DBE firms by maintaining complete and current information on those businesses and the products and services they can provide to all grantees of California.

Please complete the attached application and supplemental questionnaire if you wish to be considered for DBE certification and your business meets the following general guidelines:

- a) The firm must be at least 51% owned by one or more socially and economically disadvantaged individuals.
- b) The firm must be an independent business, and one or more of the socially and economically disadvantaged owners must control its management and daily operations.
- c) Only existing for-profit "Small Business Concerns," as defined by the Small Business Act and Small Business Administration (SBA) regulations may be certified. DBE applicants are first subject to the applicable small business size standards of the SBA. Second, the average annual gross receipts for the firm (including its affiliates) over the previous three fiscal years must not exceed U.S. DOT's cap of \$19.57 million.
- d) The Personal Net Worth (PNW) of each socially and economically disadvantaged owner must not exceed \$750,000, excluding the individual's ownership interest in the applicant firm and the equity in his/her primary residence.

For firms applying for airport concession DBE (ACDBE) certification: The average annual gross receipts for most firms (including its affiliates) over the previous three fiscal years must not exceed \$30 million. Certain types of businesses have size standards that differ from the standard (1) Banks: \$275 million in assets; (2) Car rental companies: \$40 million average annual gross receipts over the firm's three previous fiscal years; (3) Pay telephones: 1,500 employees. A Personal Net Worth statement **will be required after April 21, 2005.**

Socially and economically disadvantaged individual means any individual who is a citizen of the United States (or lawfully admitted permanent resident) and who is a member of the following groups: Black American, Hispanic American, Native American, Asian-Pacific American, Subcontinent Asian American, or Women,

or

Any individual found to be socially and economically disadvantaged on a case-by-case basis by a certifying agency pursuant to the standards of the U.S. DOT 49 CFR Part 26.

In order to avoid unnecessary delays, please complete all portions of the application and supplemental questionnaire, placing "N/A" next to items that are not applicable. Include all copies of documents requested on the application, and have the *Affidavit of Certification* notarized. Additional documentation may be requested if it is considered necessary to make a certification determination. Incomplete applications/supplemental questionnaires or applications/supplemental questionnaires without all the required documents will not be evaluated until such documents are submitted. We recommend keeping a copy of all submitted documents for your records.

REMEMBER: It is no longer necessary to apply at more than one agency. If your firm meets the criteria for certification, it will be entered into the Database of DBEs for all U.S. DOT grantees in California. Only firms currently certified as eligible DBEs may participate in the DBE programs of U.S. DOT grantees of California.

The CUCP has established two Regional DBE Certification Clusters throughout the State to effectively facilitate statewide DBE certification activities. Please forward your completed certification packet to **one** of the agencies serving the county where your firm has its principal place of business. (See enclosed Roster of Certifying Agencies.)

For Out-of-State Firms: The CUCP will not process a new application for DBE certification from a firm having its principal place of business in another state unless the firm has already been certified in that state. If your firm is located outside of California and is certified as a DBE at its home state, please forward your completed certification packet, along with a copy of your DBE certificate, to the California Department of Transportation. (See page 2 of the enclosed Roster of Certifying Agencies.)

CALIFORNIA UNIFIED
CERTIFICATION PROGRAM

**INSTRUCTIONS FOR COMPLETING THE DISADVANTAGED BUSINESS ENTERPRISE (DBE)
PROGRAM UNIFORM CERTIFICATION APPLICATION**

NOTE: If you require additional space for any question in this application, please attach additional sheets or copies as needed, taking care to indicate on each attached sheet/copy the section and number of this application to which it refers.

Section 1: CERTIFICATION INFORMATION

A. Prior/Other Certifications

Check the appropriate box indicating for which program your firm is currently certified. If you are already certified as a DBE, indicate in the appropriate box the name of the certifying agency that has previously certified your firm, and also indicate whether your firm has undergone an onsite visit. If your firm has already undergone an onsite visit/review, indicate the most recent date of that review and the state UCP that conducted the review.

NOTE: If your firm is currently certified under the SBA's 8(a) and/or SDB programs, you may not have to complete this application. You should contact your state UCP to find out about a streamlined application process for firms that are already certified under the 8(a) and SDB programs.

B. Prior/Other Applications and Privileges

Indicate whether your firm or any of the persons listed has ever withdrawn an application for a DBE program or an SBA 8(a) or SDB program, or whether any have ever been denied certification, decertified, debarred, suspended, or had bidding privileges denied or restricted by any state or local agency or Federal entity. If your answer is yes, indicate the date of such action, identify the name of the agency, and explain fully the nature of the action in the space provided.

Section 2: GENERAL INFORMATION

A. Contact Information

- (1) State the name and title of the person who will serve as your firm's primary contact under this application.
- (2) State the legal name of your firm, as indicated in your firm's Articles of Incorporation or charter.
- (3) State the primary phone number of your firm.
- (4) State a secondary phone number, if any.
- (5) State your firm's fax number, if any.
- (6) State your firm's or your contact person's email address.
- (7) State your firm's website address, if any.
- (8) State the street address of your firm (i.e. the physical location of its offices -- not a post office box address).
- (9) State the mailing address of your firm, if it is different from your firm's street address.

B. Business Profile

- (1) In the box provided, briefly describe the primary business and professional activities in which your firm engages.
- (2) State the Federal Tax ID number of your firm as provided on your firm's filed tax returns, if you have one. This could also be the Social Security number of the owner of your firm.
- (3) State the date on which your firm was officially established, as stated in your firm's Articles of Incorporation or charter.

- (4) State the date on which you and/or each other owner took ownership of the firm.

- (5) Check the appropriate box that describes the manner in which you and each other owner acquired ownership of your firm. If you checked "Other," explain in the space provided.

- (6) Check the appropriate box that indicates whether your firm is "for profit."

NOTE: If you checked "No," then you do NOT qualify for the DBE program and therefore do not need to complete the rest of this application. The DBE program requires all participating firms be for-profit enterprises.

- (7) Check the appropriate box that describes the legal form of ownership of your firm, as indicated in your firm's Articles of Incorporation. If you checked "Other," briefly explain in the space provided.

- (8) Check the appropriate box that indicates whether your firm has ever existed under different ownership, a different type of ownership, or a different name. If you checked "Yes," specify which and briefly explain the circumstances in the space provided.

- (9) Indicate in the spaces provided how many employees your firm has, specifying the number of employees who work on a full-time and part-time basis.

- (10) Specify the total gross receipts of your firm for each of the past three years, as declared in your firm's filed tax returns.

C. Relationships with Other Businesses

- (1) Check the appropriate box that indicates whether your firm is co-located at any of its business locations, or whether your firm shares a telephone number(s), a post office box, any office space, a yard, warehouse, other facilities, any equipment, or any office staff with any other business, organization, or entity of any kind. If you answered "Yes," then specify the name of the other firm(s) and briefly explain the nature of the shared facilities or other items in the space provided.

- (2) Check the appropriate box that indicates whether at present, or at any time in the past:

- (a) Your firm has been a subsidiary of any other firm;
- (b) Your firm consisted of a partnership in which one or more of the partners are other firms;
- (c) Your firm has owned any percentage of any other firm; and
- (d) Your firm has had any subsidiaries of its own.

- (3) Check the appropriate box that indicates whether any other firm has ever had an ownership interest in your firm.

- (4) If you answered "Yes" to any of the questions in (2)(a)-(d) or (3), identify the name, address and type of business for each.

D. Immediate Family Member Businesses

Check the appropriate box that indicates whether any of your immediate family members own or manage another company. An "immediate family member" is any person who is your father, mother, husband, wife, son, daughter, brother, sister, grandmother, grandfather, grandson, granddaughter, mother-in-law, or father-in-law. If you answered "Yes," provide the name of each relative, your relationship to them, the name of the company they own or manage, the type of business, and whether they own or manage the company.

Section 3: OWNERSHIP

Identify all individuals or holding companies with any ownership interest in your firm, providing the information requested below (if your firm has more than one owner, provide completed copies of this section for each additional owner):

A. Background Information

- (1) Give the name of the owner.
- (2) State his/her title or position within your firm.
- (3) Give his/her home phone number.
- (4) State his/her home (street) address.
- (5) Check the appropriate box that indicates this owner's gender.
- (6) Check the appropriate box that indicates this owner's ethnicity (check all that apply). If you checked "Other," specify this owner's ethnic group/identity not otherwise listed.
- (7) Check the appropriate box to indicate whether this owner is a U.S. citizen.
- (8) If this owner is not a U.S. citizen, check the appropriate box that indicates whether this owner is a lawfully admitted permanent resident. If this owner is neither a U.S. citizen nor a lawfully admitted permanent resident of the U.S., then this owner is NOT eligible for certification as a DBE owner. This, however, does not necessarily disqualify your firm altogether from the DBE program if another owner is a U.S. citizen or lawfully admitted permanent resident and meets the program's other qualifying requirements.

B. Ownership Interest

- (1) State the number of years during which this owner has been an owner of your firm.
- (2) Indicate the dollar value of this owner's initial investment to acquire an ownership interest in your firm, broken down by cash, real estate, equipment, and/or other investment.
- (3) State the percentage of total ownership control of your firm that this owner possesses.
- (4) State the familial relationship of this owner to each other owner of your firm.
- (5) Indicate the number, percentage of the total, class, date acquired, and method by which this owner acquired his/her shares of stock in your firm.

- (6) Check the appropriate box that indicates whether this owner performs a management or supervisory function for any other business. If you checked "Yes," state the name of the other business and this owner's title or function held in that business.

- (7) Check the appropriate box that indicates whether this owner owns or works for any other firm(s) that has any relationship with your firm. If you checked "Yes," identify the name of the other business and this owner's title or function held in that business. Briefly describe the nature of the business relationship in the space provided.

C. Disadvantaged Status

NOTE: You only need to complete this section for each owner that is applying for DBE qualification (i.e. for each owner who is claiming to be "socially and economically disadvantaged" and whose ownership interest is to be counted toward the control and 51% ownership requirements of the DBE program)

- (1) Indicate in the space provided the total Personal Net Worth (PNW) of each owner who is applying for DBE qualification. Use the PNW calculator form at the end of this application to compute each owner's PNW.
- (2) Check the appropriate box that indicates whether any trust has ever been created for the benefit of this disadvantaged owner. If you answered "Yes," briefly explain the nature, history, purpose, and current value of the trust(s).

Section 4: CONTROL

A. Identify your firm's Officers and Board of Directors:

- (1) In the space provided, state the name, title, date of appointment, ethnicity, and gender of each officer of your firm.
- (2) In the space provided, state the name, title, date of appointment, ethnicity, and gender of each individual serving on your firm's Board of Directors.
- (3) Check the appropriate box that indicates whether any of your firm's officers and/or directors listed above perform a management or supervisory function for any other business. If you answered "Yes," identify each person by name, his/her title, the name of the other business in which s/he is involved, and his/her function performed in that other business.
- (4) Check the appropriate box that indicates whether any of your firm's officers and/or directors listed above own or work for any other firm(s) that has a relationship with your firm. If you answered "Yes," identify the name of the firm, the officer or director, and the nature of his/her business relationship with that other firm.

B. Identify your firm's management personnel (by name, title, ethnicity, and gender) who control your firm in the following areas:

- (1) Making of financial decisions on your firm's behalf, including the acquisition of lines of credit, surety bonds, supplies, etc.;
 - (2) Estimating and bidding, including calculation of cost estimates, bid preparation and submission;
 - (3) Negotiating and contract execution, including participation in any of your firm's negotiations and executing contracts on your firm's behalf;
 - (4) Hiring and/or firing of management personnel, including interviewing and conducting performance evaluations;
 - (5) Field/Production operations supervision, including site supervision, scheduling, project management services, etc.;
 - (6) Office management;
 - (7) Marketing and sales;
 - (8) Purchasing of major equipment;
 - (9) Signing company checks (for any purpose); and
 - (10) Conducting any other financial transactions on your firm's behalf not otherwise listed.
 - (11) Check the appropriate box that indicates whether any of the persons listed in (1) through (10) above perform a management or supervisory function for any other business. If you answered "Yes," identify each person by name, his/her title, the name of the other business in which s/he is involved, and his/her function performed in that other business.
 - (12) Check the appropriate box that indicates whether any of the persons listed in (1) through (10) above own or work for any other firm(s) that has a relationship with your firm. If you answered "Yes," identify the name of the firm, the name of the person, and the nature of his/her business relationship with that other firm.
- C. Indicate your firm's inventory in the following categories:**
- (1) **Equipment**
State the type, make and model, and current dollar value of each piece of equipment held and/or used by your firm. Indicate whether each piece is either owned or leased by your firm.
 - (2) **Vehicles**
State the type, make and model, and current dollar value of each motor vehicle held and/or used by your firm. Indicate whether each vehicle is either owned or leased by your firm.
 - (3) **Office Space**
State the street address of each office space held and/or used by your firm. Indicate whether your firm owns or leases the office space and the current dollar value of that property or its lease.
 - (4) **Storage Space**
State the street address of each storage space held and/or used by your firm. Indicate whether your firm owns or leases the storage space and the current dollar value of that property or its lease.
- D. Does your firm rely on any other firm for management functions or employee payroll?**
Check the appropriate box that indicates whether your firm relies on any other firm for management functions or for employee payroll. If you answered "Yes," briefly explain the nature of that reliance and the extent to which the other firm carries out such functions.
- E. Financial Information**
- (1) **Banking Information**
 - (a) State the name of your firm's bank.
 - (b) Give the main phone number of your firm's bank branch.
 - (c) Give the address of your firm's bank branch.
 - (2) **Bonding Information**
 - (a) State your firm's Binder Number.
 - (b) State the name of your firm's bond agent and/or broker.
 - (c) Give your agent's/broker's phone number.
 - (d) Give your agent's/broker's address.
 - (e) State your firm's bonding limits (in dollars), specifying both the Aggregate and Project Limits.
- F. Identify all sources, amounts, and purposes of money loaned to your firm, including the names of persons or firms securing the loan, if other than the listed owner:**
State the name and address of each source, the original dollar amount and the current balance of each loan, and the purpose for which each loan was made to your firm.
- G. List all contributions or transfers of assets to/from your firm and to/from any of its owners over the past two years:**
Indicate in the spaces provided, the type of contribution or asset that was transferred, its current dollar value, the person or firm from whom it was transferred, the person or firm to whom it was transferred, the relationship between the two persons and/or firms, and the date of the transfer.
- H. List current licenses/permits held by any owner or employee of your firm.**
List the name of each person in your firm who holds a professional license or permit, the type of permit or license, the expiration date of the permit or license, and the license/permit number and issuing State of the license or permit.
- I. List the three largest contracts completed by your firm in the past three years, if any.**
List the name of each owner or contractor for each contract, the name and location of the projects under each contract, the type of work performed on each contract, and the dollar value of each contract.
- J. List the three largest active jobs on which your firm is currently working.**
For each active job listed, state the name of the prime contractor and the project number, the location, the type of work performed, the project start date, the anticipated completion date, and the dollar value of the contract.
- AFFIDAVIT & SIGNATURE**
Carefully read the attached affidavit in its entirety. Fill in the required information for each blank space, and sign and date the affidavit in the presence of a Notary Public, who must then notarize the form.

DISADVANTAGED BUSINESS ENTERPRISE PROGRAM
49 C.F.R. PART 26

UNIFORM CERTIFICATION APPLICATION

ROADMAP FOR APPLICANTS

① Should I apply?

- Is your firm at least 51%-owned by a socially and economically disadvantaged individual(s) who also controls the firm?
- Is the disadvantaged owner a U.S. citizen or lawfully admitted permanent resident of the U.S.?
- Is your firm a small business that meets the Small Business Administration's (SBA's) size standard and does not exceed \$17.42 million⁽¹⁾ in gross annual receipts?
- Is your firm organized as a for-profit business?

⇒ If you answered "Yes" to all of the questions above, you may be eligible to participate in the U.S. DOT DBE program.

② Is there an easier way to apply?

If you are currently certified by the SBA as an 8(a) and/or SDB firm, you may be eligible for a streamlined certification application process. Under this process, the certifying agency to which you are applying will accept your current SBA application package in lieu of requiring you to fill out and submit this form.

NOTE: You must still meet the requirements for the DBE program, including undergoing an on-site review.

③ Be sure to attach all of the required documents listed in the Documents Check List at the end of this form with your completed application.

④ Where can I find more information?

- U.S. DOT – <http://osdbuweb.dot.gov/business/dbe/index.html> (this site provides useful links to the rules and regulations governing the DBE program, questions and answers, and other pertinent information)
- SBA – <http://www.ntis.gov/naics> (provides a listing of NAICS codes) and <http://www.sba.gov/size/indexableofsize.html> (provides a listing of SIC codes)
- 49 CFR Part 26 (the rules and regulations governing the DBE program)

⁽¹⁾ Note: the figure of \$17.42 million has been increased to \$19.57 million pursuant to SAFETEA-LU, effective August 10, 2005.

Under Sec. 26.107 of 49 CFR Part 26, dated February 2, 1999, if at any time, the Department or a recipient has reason to believe that any person or firm has willfully and knowingly provided incorrect information or made false statements, the Department may initiate suspension or debarment proceedings against the person or firm under 49 CFR Part 29, take enforcement action under 49 CFR Part 31, Program Fraud and Civil Remedies, and/or refer the matter to the Department of Justice for criminal prosecution under 18 U.S.C. 1001, which prohibits false statements in Federal programs.

Section 1: CERTIFICATION INFORMATION

A. Prior/Other Certifications

| | | |
|---|-------------------------------|---|
| Is your firm currently certified for any of the following programs? <i>(If Yes, check appropriate box(es))</i> | <input type="checkbox"/> DBE | Name of certifying agency: |
| | | Has your firm's state UCP conducted an on-site visit? |
| | | <input type="checkbox"/> Yes, on ____/____/____ State: _____ <input type="checkbox"/> No |
| | <input type="checkbox"/> 8(a) | ⊗ STOP! If you checked either the 8(a) or SDB box, you <u>may not</u> have to complete this application. Ask your state UCP about the streamlined application process under the SBA-DOT MOU. |
| <input type="checkbox"/> SDB | | |

B. Prior/Other Applications and Privileges

| | |
|---|--|
| Has your firm (under any name) or any of its owners, Board of Directors, officers or management personnel, ever withdrawn an application for any of the programs listed above, or ever been denied certification, decertified, or debarred or suspended or otherwise had bidding privileges denied or restricted by any state or local agency, or Federal entity? | |
| <input type="checkbox"/> Yes, on ____/____/____ <input type="checkbox"/> No | |
| If Yes, identify State and name of state, local, or Federal agency and explain the nature of the action: | |

Section 2: GENERAL INFORMATION

A. Contact Information

| | | | | |
|---|--------------------|------------------------------------|----------------|------------------|
| (1) Contact person and Title: | | (2) Legal name of firm: | | |
| (3) Phone #: | (4) Other Phone #: | (5) Fax #: | | |
| (6) E-mail: | | (7) Website <i>(if have one)</i> : | | |
| (8) Street address of firm <i>(No P.O. Box)</i> : | | City: | County/Parish: | State: Zip: |
| (9) Mailing address of firm <i>(if different)</i> : | | City: | County/Parish: | State: Zip: |

B. Business Profile

| | | | |
|--|--|---|--|
| (1) Describe the primary activities of your firm: | | (2) Federal Tax ID (if any): | |
| (3) This firm was established on ____/____/____ | | (4) I/We have owned this firm since: ____/____/____ | |
| (5) Method of acquisition <i>(check all that apply)</i> : <input type="checkbox"/> Started new business <input type="checkbox"/> Bought existing business <input type="checkbox"/> Inherited business <input type="checkbox"/> Secured concession <input type="checkbox"/> Merger or consolidation <input type="checkbox"/> Other <i>(explain)</i> _____ | | | |
| (6) Is your firm "for profit"? <input type="checkbox"/> Yes <input type="checkbox"/> No | | ⊗ STOP! If your firm is NOT for-profit, then you do NOT qualify for this program and do NOT need to fill out this application. | |

(7) Type of firm (*check all that apply*):

☐ Sole Proprietorship

☐ Partnership

☐ Corporation

☐ Limited Liability Partnership

☐ Limited Liability Corporation

☐ Joint Venture

☐ Other, Describe: _____

(8) Has your firm ever existed under different ownership, a different type of ownership, or a different name?

☐ Yes ☐ No

If Yes, explain: _____

(9) Number of employees: Full-time _____ Part-time _____ Total _____

(10) Specify the gross receipts of the firm for the last 3 years: Year _____ Total receipts \$ _____

Year _____ Total receipts \$ _____

Year _____ Total receipts \$ _____

C. Relationships with Other Businesses

(1) Is your firm co-located at any of its business locations, or does it share a telephone number, P.O. Box, office space, yard, warehouse, facilities, equipment, or office staff, with any other business, organization, or entity?

☐ Yes ☐ No

If Yes, identify: Other Firm's name: _____

Explain nature of shared facilities: _____

| | | |
|--|--|--|
| (2) At present, or at any time in the past, has your firm: | (a) been a subsidiary of any other firm? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | (b) consisted of a partnership in which one or more of the partners are other firms? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | (c) owned any percentage of any other firm? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | (d) had any subsidiaries? | <input type="checkbox"/> Yes <input type="checkbox"/> No |

(3) Has any other firm had an ownership interest in your firm at present or at any time in the past? ☐ Yes ☐ No

(4) If you answered "Yes" to any of the questions in (2)(a)-(d) and/or (3), identify the following for each (*attach extra sheets, if needed*):

| <u>Name</u> | <u>Address</u> | <u>Type of Business</u> |
|-------------|----------------|-------------------------|
| 1. | | |
| 2. | | |
| 3. | | |

D. Immediate Family Member Businesses

Do any of your immediate family members own or manage another company? ☐ Yes ☐ No

If Yes, then list (*attach extra sheets, if needed*):

| <u>Name</u> | <u>Relationship</u> | <u>Company</u> | <u>Type of Business</u> | <u>Own or Manage?</u> |
|-------------|---------------------|----------------|-------------------------|-----------------------|
| 1. | | | | |
| 2. | | | | |

Section 3: OWNERSHIP

Identify all individuals or holding companies with any ownership interest in your firm, providing the information requested below *(If more than one owner, attach separate sheets for each additional owner):*

A. Background Information

| | | |
|---|---|-------------------|
| (1) Name: | (2) Title: | (3) Home Phone #: |
| (4) Home Address <i>(street and number)</i> : _____ City: _____ State: _____ Zip: _____ | | |
| (5) Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female | (6) Ethnic group membership <i>(Check all that apply)</i> : <input type="checkbox"/> Black <input type="checkbox"/> Hispanic <input type="checkbox"/> Native American <input type="checkbox"/> Asian Pacific <input type="checkbox"/> Subcontinent Asian <input type="checkbox"/> Other <i>(specify)</i> _____ | |
| (7) U.S. Citizen: <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| (8) Lawfully Admitted Permanent Resident: <input type="checkbox"/> Yes <input type="checkbox"/> No | | |

B. Ownership Interest

| (1) Number of years as owner: | <table style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left; border-bottom: 1px solid black;">(2) Initial investment to</th> <th style="text-align: left; border-bottom: 1px solid black;"><u>Type</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>Dollar Value</u></th> </tr> <tr> <td style="border-bottom: 1px solid black;">acquire ownership</td> <td style="border-bottom: 1px solid black;">Cash</td> <td style="border-bottom: 1px solid black;">\$</td> </tr> <tr> <td style="border-bottom: 1px solid black;">interest in firm:</td> <td style="border-bottom: 1px solid black;">Real Estate</td> <td style="border-bottom: 1px solid black;">\$</td> </tr> <tr> <td></td> <td style="border-bottom: 1px solid black;">Equipment</td> <td style="border-bottom: 1px solid black;">\$</td> </tr> <tr> <td></td> <td style="border-bottom: 1px solid black;">Other</td> <td style="border-bottom: 1px solid black;">\$</td> </tr> </table> | (2) Initial investment to | <u>Type</u> | <u>Dollar Value</u> | acquire ownership | Cash | \$ | interest in firm: | Real Estate | \$ | | Equipment | \$ | | Other | \$ |
|--|---|---------------------------|---------------------|---------------------|-------------------|------|----|-------------------|-------------|----|--|-----------|----|--|-------|----|
| (2) Initial investment to | | <u>Type</u> | <u>Dollar Value</u> | | | | | | | | | | | | | |
| acquire ownership | | Cash | \$ | | | | | | | | | | | | | |
| interest in firm: | Real Estate | \$ | | | | | | | | | | | | | | |
| | Equipment | \$ | | | | | | | | | | | | | | |
| | Other | \$ | | | | | | | | | | | | | | |
| (3) Percentage owned: | | | | | | | | | | | | | | | | |
| (4) Familial relationship to other owners: | | | | | | | | | | | | | | | | |
| (5) Shares of Stock: <u>Number</u> <u>Percentage</u> <u>Class</u> <u>Date acquired</u> <u>Method Acquired</u> | | | | | | | | | | | | | | | | |
| (6) Does this owner perform a management or supervisory function for any other business? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, identify: Name of Business: _____ Function/Title: _____ | | | | | | | | | | | | | | | | |
| (7) Does this owner own or work for any other firm(s) that has a relationship with this firm <i>(e.g., ownership interest, shared office space, financial investments, equipment, leases, personnel sharing, etc.)</i> ? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, identify: Name of Business: _____ Function/Title: _____ Nature of Business Relationship: _____ | | | | | | | | | | | | | | | | |

C. Disadvantaged Status – NOTE: Complete this section only for each owner applying for DBE qualification (i.e. for each owner claiming to be socially and economically disadvantaged)

| |
|--|
| (1) What is the Personal Net Worth (PNW) of the owner(s) applying for DBE qualification? <i>(Use and attach the Personal Financial Statement form at the end of this application; attach additional sheets if more than one owner is applying)</i> |
| (2) Has any trust been created for the benefit of this disadvantaged owner(s)? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, explain <i>(attach additional sheets if needed)</i> : |

Section 4: CONTROL

A. Identify your firm's Officers & Board of Directors *(If additional space is required, attach a separate sheet):*

| | Name | Title | Date Appointed | Ethnicity | Gender |
|------------------------------------|------|-------|----------------|-----------|--------|
| (1) Officers of the Company | (a) | | | | |
| | (b) | | | | |
| | (c) | | | | |
| | (d) | | | | |
| | (e) | | | | |
| (2) Board of Directors | (a) | | | | |
| | (b) | | | | |
| | (c) | | | | |
| | (d) | | | | |
| | (e) | | | | |

(3) Do any of the persons listed in (1) and/or (2) above perform a management or supervisory function for any other business? ☐ Yes ☐ No

If Yes, identify for each: Person: _____ Title: _____
 Business: _____ Function: _____

(4) Do any of the persons listed (1) and/or (2) above own or work for any other firm(s) that has a relationship with this firm (*e.g., ownership interest, shared office space, financial investments, equipment, leases, personnel sharing, etc.*)? ☐ Yes ☐ No

If Yes, identify for each: Firm Name: _____ Person: _____
 Nature of Business Relationship: _____

B. Identify your firm's management personnel who control your firm in the following areas *(If more than two persons, attach a separate sheet):*

| | Name | Title | Ethnicity | Gender |
|--|------|-------|-----------|--------|
| (1) Financial Decisions <i>(responsibility for acquisition of lines of credit, surety bonding, supplies, etc.)</i> | a. | | | |
| | b. | | | |
| (2) Estimating and bidding | a. | | | |
| | b. | | | |
| (3) Negotiating and Contract Execution | a. | | | |
| | b. | | | |
| (4) Hiring/firing of management personnel | a. | | | |
| | b. | | | |
| (5) Field/Production Operations Supervisor | a. | | | |
| | b. | | | |
| (6) Office management | a. | | | |
| | b. | | | |
| (7) Marketing/Sales | a. | | | |
| | b. | | | |
| (8) Purchasing of major equipment | a. | | | |
| | b. | | | |

| | | | | |
|---|----|--|--|--|
| (9) Authorized to Sign Company Checks (for any purpose) | a. | | | |
| | b. | | | |
| (10) Authorized to make Financial Transactions | a. | | | |
| | b. | | | |
| (11) Do any of the persons listed in (1) through (10) above perform a management or supervisory function for any other business? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, identify for each: Person: _____ Title: _____ Business: _____ Function: _____ | | | | |
| (12) Do any of the persons listed in (1) through (10) above own or work for any other firm(s) that has a relationship with this firm (e.g., ownership interest, shared office space, financial investments, equipment, leases, personnel sharing, etc.)? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, identify for each: Firm Name: _____ Person: _____ Nature of Business Relationship: _____ | | | | |

C. Indicate your firm's inventory in the following categories (attach additional sheets if needed):

(1) Equipment

| Type of Equipment | Make/Model | Current Value | Owned or Leased? |
|-------------------|------------|---------------|------------------|
| (a) | | | |
| (b) | | | |
| (c) | | | |

(2) Vehicles

| Type of Vehicle | Make/Model | Current Value | Owned or Leased? |
|-----------------|------------|---------------|------------------|
| (a) | | | |
| (b) | | | |
| (c) | | | |

(3) Office Space

| Street Address | Owned or Leased? | Current Value of Property or Lease |
|----------------|------------------|------------------------------------|
| (a) | | |
| (b) | | |

(4) Storage Space

| Street Address | Owned or Leased? | Current Value of Property or Lease |
|----------------|------------------|------------------------------------|
| (a) | | |
| (b) | | |

D. Does your firm rely on any other firm for management functions or employee payroll? ☐ Yes ☐ No

If Yes, explain:

E. Financial Information**(1) Banking Information:**

(a) Name of bank: _____ (b) Phone No: () _____
 (c) Address of bank: _____ City: _____ State: _____ Zip: _____

(2) Bonding Information: If you have bonding capacity, identify:

(a) Binder No: _____
 (b) Name of agent/broker _____ (c) Phone No: () _____
 (d) Address of agent/broker: _____ City: _____ State: _____ Zip: _____
 (e) Bonding limit: Aggregate limit \$ _____ Project limit \$ _____

F. Identify all sources, amounts, and purposes of money loaned to your firm, including the names of any persons or firms securing the loan, if other than the listed owner:

| Name of Source | Address of Source | Name of Person Securing the Loan | Original Amount | Current Balance | Purpose of Loan |
|----------------|-------------------|----------------------------------|-----------------|-----------------|-----------------|
| 1. | | | | | |
| 2. | | | | | |
| 3. | | | | | |

G. List all contributions or transfers of assets to/from your firm and to/from any of its owners over the past two years (attach additional sheets if needed):

| Contribution/Asset | Dollar Value | From Transferred | Whom To Transferred | Whom Relationship | Date of Transfer |
|--------------------|--------------|------------------|---------------------|-------------------|------------------|
| 1. | | | | | |
| 2. | | | | | |
| 3. | | | | | |

H. List current licenses/permits held by any owner and/or employee of your firm (e.g. contractor, engineer, architect, etc.)(attach additional sheets if needed):

| Name of License/Permit Holder | Type of License/Permit | Expiration Date | License Number and State |
|-------------------------------|------------------------|-----------------|--------------------------|
| 1. | | | |
| 2. | | | |
| 3. | | | |

I. List the three largest contracts completed by your firm in the past three years, if any:

| Name of Owner/Contractor | Name/Location of Project | Type of Work Performed | Dollar Value of Contract |
|--------------------------|--------------------------|------------------------|--------------------------|
| 1. | | | |
| 2. | | | |
| 3. | | | |

J. List the three largest active jobs on which your firm is currently working:

| Name of Prime Contractor and Project Number | Location of Project | Type of Work | Project Start Date | Anticipated Completion Date | Dollar Value of Contract |
|--|----------------------------|---------------------|---------------------------|------------------------------------|---------------------------------|
| 1. | | | | | |
| 2. | | | | | |
| 3. | | | | | |

DBE UNIFORM CERTIFICATION APPLICATION SUPPORTING DOCUMENTS CHECKLIST
In order to complete your application for DBE certification, you must attach copies of all of the following documents as they apply to you and your firm.

All Applicants

- ☐ Work experience resumes (that include places of ownership/employment with corresponding dates), for all owners and officers of your firm
- ☐ Personal Financial Statement (form available with this application)
- ☐ Personal tax returns for the past three years, if applicable, for each owner claiming disadvantaged status
- ☐ Your firm's tax returns (gross receipts) and all related schedules for the past three years
- ☐ Documented proof of contributions used to acquire ownership for each owner (*e.g. both sides of cancelled checks*)
- ☐ Your firm's signed loan agreements, security agreements, and bonding forms
- ☐ Descriptions of all real estate (including office/storage space, etc.) owned/leased by your firm and documented proof of ownership/signed leases
- ☐ List of equipment leased and signed lease agreements
- ☐ List of construction equipment and/or vehicles owned and titles/proof of ownership
- ☐ Documented proof of any transfers of assets to/from your firm and/or to/from any of its owners over the past two years
- ☐ Year-end balance sheets and income statements for the past three years (*or life of firm, if less than three years*); a new business must provide a current balance sheet
- ☐ All relevant licenses, license renewal forms, permits, and haul authority forms
- ☐ DBE and SBA 8(a) or SDB certifications, denials, and/or decertifications, if applicable
- ☐ Bank authorization and signatory cards
- ☐ Schedule of salaries (or other compensation or remuneration) paid to all officers, managers, owners, and/or directors of the firm
- ☐ Trust agreements held by any owner claiming disadvantaged status, if any

Partnership or Joint Venture

- ☐ Original and any amended Partnership or Joint Venture Agreements

Corporation or LLC

- ☐ Official Articles of Incorporation (*signed by the state official*)
- ☐ Both sides of all corporate stock certificates and your firm's stock transfer ledger
- ☐ Shareholders' Agreement
- ☐ Minutes of all stockholders and board of directors meetings
- ☐ Corporate by-laws and any amendments
- ☐ Corporate bank resolution and bank signature cards
- ☐ Official Certificate of Formation and Operating Agreement with any amendments (for LLCs)

Trucking Company

- ☐ Documented proof of ownership of the company
- ☐ Insurance agreements for each truck owned or operated by your firm
- ☐ Title(s) and registration certificate(s) for each truck owned or operated by your firm
- ☐ List of U.S. DOT numbers for each truck owned or operated by your firm

Regular Dealer

- ☐ Proof of warehouse ownership or lease
- ☐ List of product lines carried
- ☐ List of distribution equipment owned and/or leased

NOTE: The specific state UCP to which you are applying may have additional required documents that you must also supply with your application. Contact the appropriate certifying agency to which you are applying to find out if more is required. (See **Supplemental Document Checklist**)

DBE UNIFORM CERTIFICATION APPLICATION
SPECIAL INSTRUCTIONS
FOR AIRPORT CONCESSIONAIRE ONLY

The following are additional special instructions for a firm applying for airport concession DBE certification.

- (1) In the space available in Section 2(B)(7) of the application form, the applicant must state that it is applying for certification as an Airport Concession Disadvantaged Business Enterprise (ACDBE).
- (2) With respect to Section 4(C) of the application form, the applicant must provide information on an attached page concerning the address/location, ownership/lease status, current value of property or lease, and fees/lease payments paid to the airport.
- (3) The applicant need not complete Section 4(I) and (J) of the application form. However, the applicant must provide information on an attached page concerning any other airport concession businesses the applicant firm or any affiliate owns and/or operates, including name, location, type of concession, and start date of concession.
- (4) Please note for airport concession DBE certification, Federal regulations, 49 CFR §23.3, define personal net worth (PNW) for an airport concession owner as follows:

“Personal net worth” means “the net value of the assets of an individual remaining after total liabilities are deducted. An individual’s personal net worth does not include the following: (1) the individual’s ownership interest in an ACDBE firm or a firm that is applying for ACDBE certification; (2) the individual’s equity in his or her primary place of residence; and (3) other assets that the individual can document are necessary to obtain financing or a franchise agreement for the initiation or expansion of his or her ACDBE firm (or have in fact been encumbered to support existing financing for the individual’s ACDBE business), to a maximum of \$3 million. An individual’s personal net worth includes only his or her own share of assets held jointly or as community property with the individual’s spouse.”

If an applicant is relying upon the exclusion of “other assets” to meet the PNW requirement, the applicant must demonstrate and provide documentation to show that the assets are necessary to obtain financing or a franchise agreement to enter or expand a concession business at an airport (e.g., by producing letters from banks to that effect); or show that the assets have in fact been encumbered to support existing financing for an airport concession business (e.g., by producing loan agreements showing value of assets used as collateral for the loans).

If you have any questions or would like assistance, please contact one of the certifying agencies on the enclosed Roster.

FOR AIRPORT CONCESSIONAIRE USE ONLY

CALIFORNIA UNIFIED CERTIFICATION PROGRAM (CUCP)



Supplemental Document Checklist

Firm Name: _____

In order to complete your application for DBE certification, you must also attach copies of all of the following documents:

- ☐ Documentation of Group Membership. Please comply with one of the following: (1) For each owner seeking social disadvantaged status on the basis of Ethnic membership, please provide a document (e.g., birth certificate, U.S. Passport, Green Card, parents' birth certificate, etc.) evidencing Ethnic heritage or similar document evidencing Ethnic community affiliation. (2) For each owner seeking social disadvantaged status on the basis of Gender, please provide a document evidencing gender (e.g., birth certificate, driver's license, etc.). (3) For each owner seeking an individual showing of social disadvantage, please provide documents you deem appropriate for consideration.
- ☐ Documentation of U.S. citizenship or lawful permanent residence, e.g., U.S. birth certificate, Green Card, etc.

Supplemental Questionnaire

For firm applying for airport concession DBE certification: The following Supplemental Questionnaire is not required.

1. Is the firm's principal place of business in California? Yes_____ No_____

If no, please include a copy of the firm's DBE certificate issued in its home state. (The CUCP will not process a new application for DBE certification from a firm having its principal place of business in another state unless the firm has already been certified in that state.)

2. Is the firm authorized to do business in the State of California? Yes_____ No_____

3. List all office locations in California: _____

4. Has the firm ever done business with any U.S. DOT Grantees of California? Yes_____ No_____

If yes, please indicate the agency name(s) and latest year(s):

| Agency | Latest Year |
|--------|-------------|
| | |
| | |

| Agency | Latest Year |
|--------|-------------|
| | |
| | |

5. Is there an upcoming project in which the firm is interested and therefore, would need to be certified prior to a specific date in order to be counted toward DBE participation? Yes_____ No_____

If yes, please provide the following information:

Agency letting contract: _____

Contract Number
and Name: _____

Bid Opening date or
Request for Proposal due date: _____

6. Indicate areas where you prefer to do your work.

- | | | | | | |
|--|---|---------------------------------------|---|---|--------------------------------------|
| <input type="checkbox"/> 01 Alameda | <input type="checkbox"/> 11 Glenn | <input type="checkbox"/> 21 Marin | <input type="checkbox"/> 31 Placer | <input type="checkbox"/> 41 San Mateo | <input type="checkbox"/> 51 Sutter |
| <input type="checkbox"/> 02 Alpine | <input type="checkbox"/> 12 Humboldt | <input type="checkbox"/> 22 Mariposa | <input type="checkbox"/> 32 Plumas | <input type="checkbox"/> 42 Santa Barbara | <input type="checkbox"/> 52 Tehama |
| <input type="checkbox"/> 03 Amador | <input type="checkbox"/> 13 Imperial | <input type="checkbox"/> 23 Mendocino | <input type="checkbox"/> 33 Riverside | <input type="checkbox"/> 43 Santa Clara | <input type="checkbox"/> 53 Trinity |
| <input type="checkbox"/> 04 Butte | <input type="checkbox"/> 14 Inyo | <input type="checkbox"/> 24 Merced | <input type="checkbox"/> 34 Sacramento | <input type="checkbox"/> 44 Santa Cruz | <input type="checkbox"/> 54 Tulare |
| <input type="checkbox"/> 05 Calaveras | <input type="checkbox"/> 15 Kern | <input type="checkbox"/> 25 Modoc | <input type="checkbox"/> 35 San Benito | <input type="checkbox"/> 45 Shasta | <input type="checkbox"/> 55 Tuolumne |
| <input type="checkbox"/> 06 Colusa | <input type="checkbox"/> 16 Kings | <input type="checkbox"/> 26 Mono | <input type="checkbox"/> 36 San Bernardino | <input type="checkbox"/> 46 Sierra | <input type="checkbox"/> 56 Ventura |
| <input type="checkbox"/> 07 Contra Costa | <input type="checkbox"/> 17 Lake | <input type="checkbox"/> 27 Monterey | <input type="checkbox"/> 37 San Diego | <input type="checkbox"/> 47 Siskiyou | <input type="checkbox"/> 57 Yolo |
| <input type="checkbox"/> 08 Del Norte | <input type="checkbox"/> 18 Lassen | <input type="checkbox"/> 28 Napa | <input type="checkbox"/> 38 San Francisco | <input type="checkbox"/> 48 Solano | <input type="checkbox"/> 58 Yuba |
| <input type="checkbox"/> 09 El Dorado | <input type="checkbox"/> 19 Los Angeles | <input type="checkbox"/> 29 Nevada | <input type="checkbox"/> 39 San Joaquin | <input type="checkbox"/> 49 Sonoma | |
| <input type="checkbox"/> 10 Fresno | <input type="checkbox"/> 20 Madera | <input type="checkbox"/> 30 Orange | <input type="checkbox"/> 40 San Luis Obispo | <input type="checkbox"/> 50 Stanislaus | |

AFFIDAVIT OF CERTIFICATION

This form must be signed and notarized for each owner upon which disadvantaged status is relied.

A MATERIAL OR FALSE STATEMENT OR OMISSION MADE IN CONNECTION WITH THIS APPLICATION IS SUFFICIENT CAUSE FOR DENIAL OF CERTIFICATION, REVOCATION OF A PRIOR APPROVAL, INITIATION OF SUSPENSION OR DEBARMENT PROCEEDINGS, AND MAY SUBJECT THE PERSON AND/OR ENTITY MAKING THE FALSE STATEMENT TO ANY AND ALL CIVIL AND CRIMINAL PENALTIES AVAILABLE PURSUANT TO APPLICABLE FEDERAL AND STATE LAW.

I _____ (full name printed), swear or affirm under penalty of law that I am _____ (title) of applicant firm _____ (firm name) and that I have read and understood all of the questions in this application and that all of the foregoing information and statements submitted in this application and its attachments and supporting documents are true and correct to the best of my knowledge, and that all responses to the questions are full and complete, omitting no material information. The responses include all material information necessary to fully and accurately identify and explain the operations, capabilities and pertinent history of the named firm as well as the ownership, control, and affiliations thereof.

I recognize that the information submitted in this application is for the purpose of inducing certification approval by a government agency. I understand that a government agency may, by means it deems appropriate, determine the accuracy and truth of the statements in the application, and I authorize such agency to contact any entity named in the application, and the named firm's bonding companies, banking institutions, credit agencies, contractors, clients, and other certifying agencies for the purpose of verifying the information supplied and determining the named firm's eligibility.

I agree to submit to government audit, examination and review of books, records, documents and files, in whatever form they exist, of the named firm and its affiliates, inspection of its places(s) of business and equipment, and to permit interviews of its principals, agents, and employees. I understand that refusal to permit such inquiries shall be grounds for denial of certification.

If awarded a contract or subcontract, I agree to promptly and directly provide the prime contractor, if any, and the Department, recipient agency, or federal funding agency on an ongoing basis, current, complete and accurate information regarding (1) work performed on the project; (2) payments; and (3) proposed changes, if any, to the foregoing arrangements.

I agree to provide written notice to the recipient agency or Unified Certification Program (UCP) of any material change in the information contained in the original application within 30 calendar days of such change (e.g., ownership, address, telephone number, etc.).

I acknowledge and agree that any misrepresentations in this application or in records pertaining to a contract or subcontract will be grounds for terminating any contract or subcontract which may be awarded; denial or revocation of certification; suspension and debarment; and for initiating action under federal and/or state law concerning false statement, fraud or other applicable offenses.

I certify that I am a socially and economically disadvantaged individual who is an owner of the above-referenced firm seeking certification as a Disadvantaged Business Enterprise (DBE). In support of my application, I certify that I am a member of one or more of the following groups, and that I have held myself out as a member of the group(s) (circle all that apply):

Female Black American Hispanic American
Native American Asian-Pacific American
Subcontinent Asian American
Other (specify) _____

I certify that I am socially disadvantaged because I have been subjected to racial or ethnic prejudice or cultural bias, or have suffered the effects of discrimination, because of my identity as a member of one or more of the groups identified above, without regard to my individual qualities.

I further certify that my personal net worth does not exceed \$750,000, and that I am economically disadvantaged because my ability to compete in the free enterprise system has been impaired due to diminished capital and credit opportunities as compared to others in the same or similar line of business who are not socially and economically disadvantaged.

I declare under penalty of perjury that the information provided in this application and supporting documents is true and correct.

Executed on _____(Date)

Signature _____
(DBE Applicant)

NOTARY CERTIFICATE



PERSONAL FINANCIAL STATEMENT

U.S. SMALL BUSINESS ADMINISTRATION

As of _____, _____

Complete this form for: (1) each proprietor, or (2) each limited partner who owns 20% or more interest and each general partner, or (3) each stockholder owning 20% or more of voting stock, or (4) any person or entity providing a guaranty on the loan.

| | |
|----------------------------|-----------------|
| Name | Business Phone |
| Residence Address | Residence Phone |
| City, State, & Zip Code | |
| Business Name of Applicant | |

| ASSETS | (Omit Cents) | LIABILITIES | (Omit Cents) |
|--|--------------|--|--------------|
| Cash on hand & in Banks..... | \$ _____ | Accounts Payable | \$ _____ |
| Savings Accounts..... | \$ _____ | Notes Payable to Banks and Others..... | \$ _____ |
| IRA or Other Retirement Account | \$ _____ | (Describe in Section 2) | |
| Accounts & Notes Receivable..... | \$ _____ | Installment Account (Auto) | \$ _____ |
| Life Insurance-Cash Surrender Value Only | \$ _____ | Mo. Payments \$ _____ | |
| (Complete Section 8) | | Installment Account (Other) | \$ _____ |
| Stocks and Bonds | \$ _____ | Mo. Payments \$ _____ | |
| (Describe in Section 3) | | Loan on Life Insurance | \$ _____ |
| Real Estate..... | \$ _____ | Mortgages on Real Estate | \$ _____ |
| (Describe in Section 4) | | (Describe in Section 4) | |
| Automobile-Present Value | \$ _____ | Unpaid Taxes..... | \$ _____ |
| Other Personal Property | \$ _____ | (Describe in Section 6) | |
| (Describe in Section 5) | | Other Liabilities | \$ _____ |
| Other Assets | \$ _____ | (Describe in Section 7) | |
| (Describe in Section 5) | | Total Liabilities | \$ _____ |
| Total | \$ _____ | Net Worth | \$ _____ |
| | | Total | \$ _____ |

Section 1. Source of Income

| | |
|--------------------------------------|----------|
| Salary | \$ _____ |
| Net Investment Income | \$ _____ |
| Real Estate Income..... | \$ _____ |
| Other Income (Describe below)* | \$ _____ |

Contingent Liabilities

| | |
|---------------------------------------|----------|
| As Endorser or Co-Maker | \$ _____ |
| Legal Claims & Judgments..... | \$ _____ |
| Provision for Federal Income Tax..... | \$ _____ |
| Other Special Debt | \$ _____ |

Description of Other Income in Section 1.

*Alimony or child support payments need not be disclosed in "Other Income" unless it is desired to have such payments counted toward total income.

Section 2. Notes Payable to Banks and Others. (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed.)

| Name and Address of Noteholder(s) | Original Balance | Current Balance | Payment Amount | Frequency (monthly, etc.) | How Secured or Endorsed Type of Collateral |
|-----------------------------------|------------------|-----------------|----------------|---------------------------|--|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

| Section 3. Stocks and Bonds. (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed). | | | | | |
|---|--------------------|------|------------------------------------|-------------------------------|-------------|
| Number of Shares | Name of Securities | Cost | Market Value Quotation/Exchange | Date of Quotation/Exchange | Total Value |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

| Section 4. Real Estate Owned. | | (List each parcel separately. Use attachment if necessary. Each attachment must be identified as a part of this statement and signed.) | | |
|-----------------------------------|------------|--|------------|--|
| | Property A | Property B | Property C | |
| Type of Property | | | | |
| Address | | | | |
| Date Purchased | | | | |
| Original Cost | | | | |
| Present Market Value | | | | |
| Name & Address of Mortgage Holder | | | | |
| Mortgage Account Number | | | | |
| Mortgage Balance | | | | |
| Amount of Payment per Month/Year | | | | |
| Status of Mortgage | | | | |

| Section 5. Other Personal Property and Other Assets. | (Describe, and if any is pledged as security, state name and address of lien holder, amount of lien, terms of payment and if delinquent, describe delinquency) |
|--|--|
| | |

| Section 6. Unpaid Taxes. | (Describe in detail, as to type, to whom payable, when due, amount, and to what property, if any, a tax lien attaches.) |
|--------------------------|---|
| | |

| Section 7. Other Liabilities. | (Describe in detail.) |
|-------------------------------|-----------------------|
| | |

| Section 8. Life Insurance Held. | (Give face amount and cash surrender value of policies - name of insurance company and beneficiaries) |
|---------------------------------|---|
| | |

I authorize SBA/Lender to make inquiries as necessary to verify the accuracy of the statements made and to determine my creditworthiness. I certify the above and the statements contained in the attachments are true and accurate as of the stated date(s). These statements are made for the purpose of either obtaining a loan or guaranteeing a loan. I understand FALSE statements may result in forfeiture of benefits and possible prosecution by the U.S. Attorney General (Reference 18 U.S.C. 1001).

| | | |
|------------|-------|-------------------------|
| Signature: | Date: | Social Security Number: |
| Signature: | Date: | Social Security Number: |

PLEASE NOTE: The estimated average burden hours for the completion of this form is 1.5 hours per response. If you have questions or comments concerning this estimate or any other aspect of this information, please contact Chief, Administrative Branch, U.S. Small Business Administration, Washington, D.C. 20416, and Clearance Officer, Paper Reduction Project (3245-0188), Office of Management and Budget, Washington, D.C. 20503. PLEASE DO NOT SEND FORMS TO OMB.

Instructions to complete Personal Financial Statement (SBA Form 413) for the California Unified Certification Program:

1. Fill out all line items to the best of your ability. Be sure to include the DATE in the upper right corner of the First page.
2. Include all of your and, if applicable, your spouse's assets and liabilities.
3. Assets that must be included are real property (includes rental or vacation homes), personal property wherever located (includes household goods, collectibles, clothing and jewelry), other businesses, vehicles, boats, trailers, cash, bank accounts, stocks, bonds, retirement accounts, insurance policies and any other assets where you have an ownership interest.
4. Complete Section 4 for all of your real estate. Be sure to include and identify which is your primary residence.
5. For married individuals, list both names and all property, including both community and separate property. Complete Section 5 to identify separate property for each spouse.
6. Describe other assets, other property, and other liabilities in detail. Include your equity in your business also, under Other Assets, and then itemize all Other Assets in Section 5.
7. Market values for items such as real estate, other assets and other property should be as accurate as possible to their value as of the above date.
8. If necessary, use additional sheet(s) of paper to report all information and details.
9. To compute **Net Worth**, first add all liabilities and put that figure in the Total Liabilities line, then subtract Total Liabilities from Total Assets to get your **Net Worth**.
10. To determine economic disadvantage eligibility, your **Net Worth** amount will be adjusted by the following to obtain an Adjusted Net Worth figure (see worksheet below).

- Exclusion of an individual's ownership interest in the applicant firm;
- Exclusion of an individual's equity in his or her primary residence;
- Deduction of tax and interest penalties that would accrue if retirement savings or investments (e.g., pension plans, Individual Retirement Accounts, 401(k) accounts, etc.) were distributed at the present time.
- **For airport concessionaire only:** Exclusion of other assets documented to be necessary to obtain financing or a franchise agreement for the initiation, support or expansion of an airport concession, to a maximum of \$3 million.

An individual's personal net worth includes only his or her own share of assets held jointly or as community property with the individual's spouse. If your Adjusted Net Worth exceeds the \$750,000 cap and you, individually, or you and other individuals are the majority owners of an applicant firm, the firm is not eligible for DBE certification. If the Adjusted Net Worth of the majority owner(s) exceeds the \$750,000 cap at any time after your firm is certified, the firm is no longer eligible for certification. Should that occur, it is your responsibility to contact your certifying agency in writing to advise the firm no longer qualifies.

Adjusted Net Worth Worksheet:

Net Worth (less one-half of community property, if applicable)\$ _____

Less: ① ownership interest in applicant firm.....(_____)

② equity in primary residence.....(_____)

③ tax and interest penalties on retirement accounts.....(_____)

④ airport concessionaire exclusion, if applicable.....(_____)

Adjusted Net Worth Total.....\$ _____

11. Be sure to sign, and date at the end of the statement. If you have any questions or would like assistance in completing this form, please contact one of the certifying agencies on the enclosed Roster.

A MATERIAL OR FALSE STATEMENT OR OMISSION MADE IN CONNECTION WITH THIS APPLICATION IS SUFFICIENT CAUSE FOR DENIAL OF CERTIFICATION, REVOCATION OF A PRIOR APPROVAL, INITIATION OF SUSPENSION OR DEBARMENT PROCEEDINGS, AND MAY SUBJECT THE PERSON AND/OR ENTITY MAKING THE FALSE STATEMENT TO ANY AND ALL CIVIL AND CRIMINAL PENALTIES AVAILABLE PURSUANT TO APPLICABLE FEDERAL AND STATE LAW.

CALIFORNIA UNIFIED CERTIFICATION PROGRAM (CUCP)



NAICS Codes

The California Unified Certification Program adopted the 2002 North American Industry Classification System (NAICS), an updated federal classification system, on October 27, 2003. Please indicate below areas of expertise that you prefer to perform in order of importance. Enclosed is a partial list of NAICS codes for your convenience. For a full list of NAICS codes and assistance in locating appropriate NAICS codes and determining if your firm meets U.S. Small Business Administration (SBA) and U.S. DOT size standards, a search tool is available on the SBA web site at: <http://www.sba.gov/size/index.html>. DBE applicants are first subject to the applicable small business size standards of the Small Business Administration (SBA). Second, the average annual gross receipts for the firm (including its affiliates) over the previous three fiscal years must not exceed the U.S. Department of Transportation's cap of \$19.57 million, as amended pursuant to SAFETEA-LU. Please note that size standards are subject to change at any time by the SBA. If you do not have Internet access or need assistance, please contact one of the certifying agencies on the enclosed Roster.

For firm applying for airport concession DBE certification: The average annual gross receipts for the firm (including its affiliates) over the previous three fiscal years must not exceed \$30 million.

NAICS Code

Description of Work/Service

CALIFORNIA UNIFIED CERTIFICATION PROGRAM
List of NAICS Codes (partial)

| 110000 | <i>Agriculture, Forestry, Fishing and Hunting</i> |
|---------------|---|
| 111000 | Crop Production |
| 112000 | Animal Production |
| 113000 | Forestry and Logging |
| 114000 | Fishing, Hunting and Trapping |
| 115000 | Support Activities for Agriculture and Forestry |
| 210000 | <i>Mining</i> |
| 211000 | Oil and Gas Extraction |
| 212000 | Mining (except Oil and Gas) |
| 213000 | Support Activities for Mining |
| 220000 | <i>Utilities</i> |
| 221110 | Hydroelectric, Fossil Fuel, Nuclear and Other Electric Power Generation |
| 221120 | Electric Power Transmission, Control and Distribution |
| 221310 | Water Supply and Irrigation Systems |
| 230000 | <i>Construction*</i> |
| 236000 | <i>Construction of Buildings</i> |
| 236115 | New Single-Family Housing Construction (except Operative Builders) |
| 236116 | New Multifamily Housing Construction (except Operative Builders) |
| 236117 | New Housing Operative Builders |
| 236118 | Residential Remodelers |
| 236210 | Industrial Building Construction |
| 236220 | Commercial and Institutional Building Construction |
| 237000 | <i>Heavy and Civil Engineering Construction</i> |
| 237110 | Water and Sewer Line and Related Structures Construction |
| 237120 | Oil and Gas Pipeline and Related Structures Construction |
| 237130 | Power and Communication Line and Related Structures Construction |
| 237210 | Land Subdivision |
| 237310 | Highway, Street, and Bridge Construction |
| 237990 | Other Heavy and Civil Engineering Construction |
| 237990 | Dredging and Surface Cleanup Activities |
| 238000 | <i>Specialty Trade Contractors</i> |
| 238110 | Poured Concrete Foundation and Structure Contractors |
| 238120 | Structural Steel and Precast Concrete Contractors |
| 238130 | Framing Contractors |
| 238140 | Masonry Contractors |
| 238150 | Glass and Glazing Contractors |
| 238160 | Roofing Contractors |
| 238170 | Siding Contractors |
| 238190 | Other Foundation, Structure, and Building Exterior Contractors |
| 238210 | Electrical Contractors |
| 238220 | Plumbing, Heating, and Air-Conditioning Contractors |
| 238290 | Other Building Equipment Contractors |
| 238310 | Drywall and Insulation Contractors |
| 238320 | Painting and Wall Covering Contractors |
| 238330 | Flooring Contractors |
| 238340 | Tile and Terrazzo Contractors |
| 238350 | Finish Carpentry Contractors |
| 238390 | Other Building Finishing Contractors |
| 238910 | Site Preparation Contractors |
| 238990 | All Other Specialty Trade Contractors |
| 238990 | Building and Property Specialty Trade Services |

| 310000 - 339999 | <i>Manufacturing</i> |
|------------------------|---|
| 311000 | <i>Food Manufacturing</i> |
| 312000 | <i>Beverage and Tobacco Product Manufacturing</i> |
| 313000 | <i>Textile Mills</i> |
| 314000 | <i>Textile Product Mills</i> |
| 315000 | <i>Apparel Manufacturing</i> |
| 315211 | Men's and Boys' Cut and Sew Apparel Contractors |
| 315212 | Women's, Girls', and Infants' Cut and Sew Apparel Contractors |
| 315220 | Men's and Boys' Cut and Sew Apparel Manufacturing |
| 315230 | Women's and Girls' Cut and Sew Apparel Manufacturing |
| 315299 | All Other Cut and Sew Apparel Manufacturing |
| 315999 | Other Apparel Accessories and Other Apparel Manufacturing |
| 316000 | <i>Leather and Allied Product Manufacturing</i> |
| 316211 | Rubber and Plastics Footwear Manufacturing |
| 316213 | Men's Footwear (except Athletic) Manufacturing |
| 316214 | Women's Footwear (except Athletic) Manufacturing |
| 316219 | Other Footwear Manufacturing |
| 321000 | <i>Wood Product Manufacturing</i> |
| 322000 | <i>Paper Manufacturing</i> |
| 323000 | <i>Printing and Related Support Activities</i> |
| 323110 | Commercial Lithographic Printing |
| 323111 | Commercial Gravure Printing |
| 323112 | Commercial Flexographic Printing |
| 323113 | Commercial Screen Printing |
| 323114 | Quick Printing |
| 323115 | Digital Printing |
| 323116 | Manifold Business Forms Printing |
| 323117 | Books Printing |
| 323118 | Blankbook, Loose-leaf Binder and Device Manufacturing |
| 323119 | Other Commercial Printing |
| 323121 | Tradebinding and Related Work |
| 323122 | Prepress Services |
| 324000 | <i>Petroleum and Coal Products Manufacturing</i> |
| 324121 | Asphalt Paving Mixture and Block Manufacturing |
| 324122 | Asphalt Shingle and Coating Materials Manufacturing |
| 325000 | <i>Chemical Manufacturing</i> |
| 326000 | <i>Plastics and Rubber Products Manufacturing</i> |
| 326211 | Tire Manufacturing (except Retreading) |
| 326212 | Tire Retreading |
| 326220 | Rubber and Plastics Hoses and Belting Manufacturing |
| 326291 | Rubber Product Manufacturing for Mechanical Use |
| 326299 | All Other Rubber Product Manufacturing |
| 327000 | <i>Nonmetallic Mineral Product Manufacturing</i> |
| 331000 | <i>Primary Metal Manufacturing</i> |
| 332000 | <i>Fabricated Metal Product Manufacturing</i> |
| 332116 | Metal Stamping |
| 332322 | Sheet Metal Work Manufacturing |
| 332323 | Ornamental and Architectural Metal Work Manufacturing |
| 332710 | Machine Shops |
| 332721 | Precision Turned Product Manufacturing |
| 332996 | Fabricated Pipe and Pipe Fitting Manufacturing |
| 333000 | <i>Machinery Manufacturing</i> |
| 333120 | Construction Machinery Manufacturing |
| 333311 | Automatic Vending Machine Manufacturing |
| 333313 | Office Machinery Manufacturing |

*Note: evidence of State or other licensing is required in order to be classified in this industry, if applicable.

(Rev. 09.05)

California Unified Certification Program
List of NAICS Codes (partial)

| | |
|--------|--|
| 333414 | Heating Equipment (except Warm Air Furnaces) Manufacturing |
| 333415 | Air-Conditioning and Warm Air Heating Equipment and Commercial and Industrial Refrigeration Equipment Manufacturing |
| 333514 | Special Die and Tool, Die Set, Jig and Fixture Manufacturing |
| 333613 | Mechanical Power Transmission Equipment Manufacturing |
| 333618 | Other Engine Equipment Manufacturing |
| 333911 | Pump and Pumping Equipment Manufacturing |
| 333921 | Elevator and Moving Stairway Manufacturing |
| 333922 | Conveyor and Conveying Equipment Manufacturing |
| 333923 | Overhead Traveling Crane, Hoist and Monorail System Manufacturing |
| 333924 | Industrial Truck, Tractor, Trailer and Stacker Machinery Manufacturing |
| 334000 | <i>Computer and Electronic Product Manufacturing</i> |
| 334111 | Electronic Computer Manufacturing |
| 334112 | Computer Storage Device Manufacturing |
| 334113 | Computer Terminal Manufacturing |
| 334119 | Other Computer Peripheral Equipment Manufacturing |
| 334210 | Telephone Apparatus Manufacturing |
| 334220 | Radiant Television Broadcasting and Wireless Communications Equipment Manufacturing |
| 334290 | Other Communications Equipment Manufacturing |
| 334310 | Audio and Video Equipment Manufacturing |
| 334417 | Electronic Connector Manufacturing |
| 334418 | Printed Circuit Assembly (Electronic Assembly) Mfg |
| 334419 | Other Electronic Component Manufacturing |
| 334511 | Search, Detection, Navigation, Guidance, Aeronautical, and Nautical System and Instrument Manufacturing |
| 334512 | Automatic Environmental Control Manufacturing for Residential, Commercial and Appliance Use |
| 334513 | Instruments and Related Products Manufacturing for Measuring, Displaying, and Controlling Industrial Process Variables |
| 334514 | Totalizing Fluid Meter and Counting Device Manufacturing |
| 334518 | Watch, Clock, and Part Manufacturing |
| 334519 | Other Measuring and Controlling Device Manufacturing |
| 334611 | Software Reproducing |
| 334612 | Prerecorded Compact Disc (except Software), Tape, and Record Reproducing |
| 334613 | Magnetic and Optical Recording Media Manufacturing |
| 335000 | <i>Electrical Equipment, Appliance and Component Manufacturing</i> |
| 336000 | <i>Transportation Equipment Manufacturing</i> |
| 336112 | Light Truck and Utility Vehicle Manufacturing |
| 336120 | Heavy Duty Truck Manufacturing |
| 336211 | Motor Vehicle Body Manufacturing |
| 336212 | Truck Trailer Manufacturing |
| 336311 | Carburetor, Piston, Piston Ring and Valve Manufacturing |
| 336312 | Gasoline Engine and Engine Parts Manufacturing |
| 336321 | Vehicular Lighting Equipment Manufacturing |
| 336322 | Other Motor Vehicle Electrical and Electronic Equipment Manufacturing |
| 336330 | Motor Vehicle Steering and Suspension Components (except Spring) Manufacturing |
| 336340 | Motor Vehicle Brake System Manufacturing |
| 336350 | Motor Vehicle Transmission and Power Train Parts Manufacturing |
| 336360 | Motor Vehicle Seating and Interior Trim Manufacturing |
| 336370 | Motor Vehicle Metal Stamping |
| 336391 | Motor Vehicle Air-Conditioning Manufacturing |
| 336399 | All Other Motor Vehicle Parts Manufacturing |

| | |
|--------|---|
| 336411 | Aircraft Manufacturing |
| 336510 | Railroad Rolling Stock Manufacturing |
| 336611 | Ship Building and Repairing |
| 336991 | Motorcycle, Bicycle and Parts Manufacturing |
| 336999 | All Other Transportation Equipment Manufacturing |
| 337000 | <i>Furniture and Related Product Manufacturing</i> |
| 337127 | Institutional Furniture Manufacturing |
| 337211 | Wood Office Furniture Manufacturing |
| 337214 | Office Furniture (Except Wood) Manufacturing |
| 337215 | Showcase, Partition, Shelving, and Locker Manufacturing |
| 337920 | Blind and Shade Manufacturing |
| 339000 | <i>Miscellaneous Manufacturing</i> |
| 339111 | Laboratory Apparatus and Furniture Manufacturing |
| 339950 | Sign Manufacturing |
| 339991 | Gasket, Packing, and Sealing Device Manufacturing |

| 420000 | Wholesale Trade |
|---------------|---|
| 423000 | <i>Merchant Wholesalers, Durable Goods</i> |
| 423110 | Automobile and Other Motor Vehicle Merchant Wholesalers |
| 423120 | Motor Vehicle Supplies and New Parts Merchant Wholesalers |
| 423130 | Tire and Tube Merchant Wholesalers |
| 423140 | Motor Vehicle Parts (Used) Merchant Wholesalers |
| 423210 | Furniture Merchant Wholesalers |
| 423310 | Lumber, Plywood, Millwork, and Wood Panel Merchant Wholesalers |
| 423320 | Brick, Stone, and Related Construction Material Merchant Wholesalers |
| 423330 | Roofing, Siding, and Insulation Material Merchant Wholesalers |
| 423390 | Other Construction Material Merchant Wholesalers |
| 423410 | Photographic Equipment and Supplies Merchant Wholesalers |
| 423420 | Office Equipment Merchant Wholesalers |
| 423430 | Computer and Computer Peripheral Equipment and Software Merchant Wholesalers |
| 423440 | Other Commercial Equipment Merchant Wholesalers |
| 423450 | Medical, Dental, and Hospital Equipment and Supplies Merchant Wholesalers |
| 423490 | Other Professional Equipment and Supplies Merchant Wholesalers |
| 423510 | Metal Service Centers and Other Metal Merchant Wholesalers |
| 423610 | Electrical Apparatus and Equipment, Wiring Supplies, and Related Equipment Merchant Wholesalers |
| 423620 | Electrical and Electronic Appliance, Television, and Radio Set Merchant Wholesalers |
| 423690 | Other Electronic Parts and Equipment Merchant Wholesalers |
| 423710 | Hardware Merchant Wholesalers |
| 423720 | Plumbing and Heating Equipment and Supplies (Hydronics) Merchant Wholesalers |
| 423730 | Warm Air Heating and Air-Conditioning Equipment and Supplies Merchant Wholesalers |
| 423740 | Refrigeration Equipment and Supplies Merchant Wholesalers |
| 423810 | Construction and Mining (except Oil Well) Machinery and Equipment Merchant Wholesalers |
| 423820 | Farm and Garden Machinery and Equipment Merchant Wholesalers |
| 423830 | Industrial Machinery and Equipment Merchant Wholesalers |
| 423840 | Industrial Supplies Merchant Wholesalers |
| 423850 | Service Establishment Equipment and Supplies Merchant Wholesalers |
| 423860 | Transportation Equipment and Supplies (except Motor Vehicle) Merchant Wholesalers |
| 423930 | Recyclable Material Merchant Wholesalers |
| 423940 | Other Miscellaneous Durable Goods Merchant Wholesalers |

***Note: evidence of State or other licensing is required in order to be classified in this industry, if applicable.**

California Unified Certification Program
List of NAICS Codes (partial)

| | |
|------------------------|--|
| 424000 | <i>Merchant Wholesalers, Nondurable Goods</i> |
| 424110 | Printing and Writing Paper Merchant Wholesalers |
| 424120 | Stationary and Office Supplies Merchant Wholesalers |
| 424130 | Industrial and Personal Service Paper Merchant Wholesalers |
| 424210 | Drugs and Druggists' Sundries Merchant Wholesalers |
| 424310 | Piece Goods, Notions, and Other Dry Goods Merchant Wholesalers |
| 424320 | Men's and Boys' Clothing and Furnishings Merchant Wholesalers |
| 424330 | Women's, Children's, and Infants' Clothing and Accessories Merchant Wholesalers |
| 424340 | Footwear Merchant Wholesalers |
| 424410 | General Line Grocery Merchant Wholesalers |
| 424420 | Packaged Frozen Food Merchant Wholesalers |
| 424490 | Other Grocery and Related Products Merchant Wholesalers |
| 424610 | Plastics Materials and Basic Forms and Shapes Merchant Wholesalers |
| 424690 | Other Chemical and Allied Products Merchant Wholesalers |
| 424710 | Petroleum Bulk Stations and Terminals |
| 424720 | Petroleum and Petroleum Products Merchant Wholesalers (except Bulk Stations and Terminals) |
| 424920 | Book, Periodical, and Newspaper Merchant Wholesalers |
| 424930 | Flower, Nursery Stock, and Florists' Supplies Merchant Wholesalers |
| 424940 | Tobacco and Tobacco Product Merchant Wholesalers |
| 424950 | Paint, Varnish, and Supplies Merchant Wholesalers |
| 424990 | Other Miscellaneous Nondurable Goods Merchant Wholesalers |
| 425000 | Wholesale Electronic Markets and Agents and Brokers |
| 425110 | Business to Business Electronic Markets |
| 425120 | Wholesale Trade Agents and Brokers |
| 440000 - 459999 | <i>Retail Trade</i> |
| 441000 | <i>Motor Vehicle and Parts Dealers</i> |
| 441110 | New Car Dealers |
| 441120 | Used Car Dealers |
| 441221 | Motorcycle Dealers |
| 441222 | Boat Dealers |
| 441229 | All Other Motor Vehicle Dealers |
| 441229 | Aircraft Dealers, Retail |
| 441310 | Automotive Parts and Accessories Stores |
| 441320 | Tire Dealers |
| 442000 | <i>Furniture and Home Furnishings Stores</i> |
| 442110 | Furniture Stores |
| 442210 | Floor Covering Stores |
| 442291 | Window Treatment Stores |
| 442299 | All Other Home Furnishings Stores |
| 443000 | <i>Electronics and Appliance Stores</i> |
| 443111 | Household Appliance Stores |
| 443112 | Radio, Television and Other Electronics Stores |
| 443120 | Computer and Software Stores |
| 443130 | Camera and Photographic Supplies Stores |
| 444000 | <i>Building Material and Garden Equipment and Supplies Dirs</i> |
| 444110 | Home Centers |
| 444120 | Paint and Wallpaper Stores |
| 444130 | Hardware Stores |
| 444190 | Other Building Material Dealers |
| 444210 | Outdoor Power Equipment Stores |
| 444220 | Nursery and Garden Centers |
| 445000 | <i>Food and Beverage Stores</i> |

| | |
|------------------------|---|
| 446000 | <i>Health and Personal Care Stores</i> |
| 447000 | <i>Gasoline Stations</i> |
| 448000 | <i>Clothing and Clothing Accessories Stores</i> |
| 448110 | Men's Clothing Stores |
| 448120 | Women's Clothing Stores |
| 448130 | Children's and Infants' Clothing Stores |
| 448140 | Family Clothing Stores |
| 448150 | Clothing Accessories Stores |
| 448190 | Other Clothing Stores |
| 448210 | Shoe Stores |
| 448320 | Luggage and Leather Goods Stores |
| 451000 | <i>Sporting Good, Hobby, Book and Music Stores</i> |
| 451211 | Book Stores |
| 451212 | News Dealers and Newsstands |
| 452000 | <i>General Merchandise Store</i> |
| 453000 | <i>Miscellaneous Store Retailers</i> |
| 453110 | Florists |
| 453210 | Office Supplies and Stationery Stores |
| 453220 | Gift, Novelty and Souvenir Stores |
| 453310 | Used Merchandise Stores |
| 454000 | <i>Nonstore Retailers</i> |
| 454111 | Electronic Shopping |
| 454112 | Electronic Auctions |
| 454113 | Mail-Order Houses |
| 454210 | Vending Machine Operators |
| 454311 | Heating Oil Dealers |
| 454312 | Liquefied Petroleum Gas (Bottled Gas) Dealers |
| 454319 | Other Fuel Dealers |
| 454390 | Other Direct Selling Establishments |
| 480000 - 499999 | <i>Transportation</i> |
| 481000 | <i>Air Transportation</i> |
| 481111 | Scheduled Passenger Air Transportation |
| 481112 | Scheduled Freight Air Transportation |
| 481211 | Nonscheduled Chartered Passenger Air Transportation |
| 481212 | Nonscheduled Chartered Freight Air Transportation |
| 481219 | Other Nonscheduled Air Transportation |
| 482000 | <i>Rail Transportation</i> |
| 483000 | <i>Water Transportation</i> |
| 484000 | <i>Truck Transportation</i> |
| 484110 | General Freight Trucking, Local |
| 484121 | General Freight Trucking, Long-Distance, Truckload |
| 484122 | General Freight Trucking, Long-Distance, Less Than Truckload |
| 484210 | Used Household and Office Goods Moving |
| 484220 | Specialized Freight (except Used Goods) Trucking, Local |
| 484230 | Specialized Freight (except Used Goods) Trucking, Long-Distance |
| 485000 | <i>Transit and Ground Passenger Transportation</i> |
| 485111 | Mixed Mode Transit Systems |
| 485112 | Commuter Rail Systems |
| 485113 | Bus and Motor Vehicle Transit Systems |
| 485119 | Other Urban Transit Systems |
| 485210 | Interurban and Rural Bus Transportation |
| 485310 | Taxi Service |
| 485320 | Limousine Service |
| 485410 | School and Employee Bus Transportation |
| 485510 | Charter Bus Industry |

California Unified Certification Program
List of NAICS Codes (partial)

| | |
|---------------|---|
| 485991 | Special Needs Transportation |
| 485999 | All Other Transit and Ground Passenger Transportation |
| 486000 | <i>Pipeline Transportation</i> |
| 487000 | <i>Scenic and Sightseeing Transportation</i> |
| 488000 | <i>Support Activities for Transportation</i> |
| 488111 | Air Traffic Control |
| 488119 | Other Airport Operations |
| 488190 | Other Support Activities for Air Transportation |
| 488210 | Support Activities for Rail Transportation |
| 488310 | Port and Harbor Operations |
| 488320 | Marine Cargo Handling |
| 488390 | Other Support Activities for Water Transportation |
| 488410 | Motor Vehicle Towing |
| 488490 | Other Support Activities for Road Transportation |
| 488510 | Freight Transportation Arrangement |
| 488991 | Packing and Crating |
| 488999 | All Other Support Activities for Transportation |
| 491000 | <i>Postal Service</i> |
| 492000 | <i>Couriers and Messengers</i> |
| 492110 | Couriers |
| 492210 | Local Messengers and Local Delivery |
| 493000 | <i>Warehousing and Storage</i> |
| 493110 | General Warehousing and Storage |
| 493120 | Refrigerated Warehousing and Storage |
| 493190 | Other Warehousing and Storage |
| 510000 | <i>Information</i> |
| 511000 | <i>Publishing Industries (except Internet)</i> |
| 511110 | Newspaper Publishers |
| 511120 | Periodical Publishers |
| 511130 | Book Publishers |
| 511140 | Directory and Mailing List Publishers |
| 511199 | All Other Publishers |
| 511210 | Software Publishers |
| 512110 | Motion Picture and Video Production |
| 512191 | Teleproduction and Other Postproduction Services |
| 512199 | Other Motion Picture and Video Industries |
| 512210 | Record Production |
| 512220 | Integrated Record Production/Distribution |
| 512240 | Sound Recording Studios |
| 512290 | Other Sound Recording Industries |
| 515000 | <i>Broadcasting (except Internet)</i> |
| 515111 | Radio Networks* |
| 515112 | Radio Stations* |
| 515120 | Television Broadcasting* |
| 515210 | Cable and Other Subscription Programming |
| 516000 | <i>Internet Publishing and Broadcasting</i> |
| 516110 | Internet Publishing and Broadcasting |
| 517000 | <i>Telecommunications</i> |
| 517110 | Wired Telecommunications Carriers |
| 517211 | Paging |
| 517212 | Cellular and Other Wireless Telecommunications |
| 517310 | Telecommunications Resellers |
| 517410 | Satellite Telecommunications |
| 517510 | Cable and Other Program Distribution |
| 517910 | Other Telecommunications |
| | <i>Internet Service Providers, Web Search Portals, and Data Processing Services</i> |
| 518000 | |
| 518111 | Internet Service Providers |

| | |
|---------------|---|
| 518112 | Web Search Portals |
| 518210 | Data Processing, Hosting, and Related Services |
| 519000 | <i>Other Information Services</i> |
| 519110 | News Syndicates |
| 519120 | Libraries and Archives |
| 519190 | All Other Information Services |
| 520000 | <i>Finance and Insurance*</i> |
| 522000 | <i>Credit Intermediation and Related Activities</i> |
| 522220 | Sales Financing |
| 522291 | Consumer Lending |
| 522292 | Real Estate Credit |
| 522298 | All Other Non-Depository Credit Intermediation |
| 522310 | Mortgage and Nonmortgage Loan Brokers |
| | Financial Transactions Processing, Reserve, and Clearing House Activities |
| 522320 | |
| 522390 | Other Activities Related to Credit Intermediation |
| 523000 | <i>Financial Investments and Related Activities</i> |
| 523110 | Investment Banking and Securities Dealing |
| 523120 | Securities Brokerage |
| 523130 | Commodity Contracts Dealing |
| 523140 | Commodity Contracts Brokerage |
| 523910 | Miscellaneous Intermediation |
| 523920 | Portfolio Management |
| 523930 | Investment Advice |
| 523991 | Trust, Fiduciary and Custody Activities |
| 523999 | Miscellaneous Financial Investment Activities |
| 524000 | <i>Insurance Carriers and Related Activities</i> |
| 524113 | Direct Life Insurance Carriers |
| 524114 | Direct Health and Medical Insurance Carriers |
| 524126 | Direct Property and Casualty Insurance Carriers |
| 524127 | Direct Title Insurance Carriers |
| | Other Direct Insurance (except Life, Health and Medical) Carriers |
| 524128 | |
| 524130 | Reinsurance Carriers |
| 524210 | Insurance Agencies and Brokerages |
| 524291 | Claims Adjusting |
| 524292 | Third Party Administration of Insurance and Pension Funds |
| 524298 | All Other Insurance Related Activities |
| 525000 | <i>Funds, Trusts and Other Financial Vehicles</i> |
| 525110 | Pension Funds |
| 525120 | Health and Welfare Funds |
| 525190 | Other Insurance Funds |
| 525910 | Open-End Investment Funds |
| 525920 | Trusts, Estates, and Agency Accounts |
| 525930 | Real Estate Investment Trusts |
| 525990 | Other Financial Vehicles |
| 530000 | <i>Real Estate and Rental and Leasing</i> |
| 531000 | <i>Real Estate</i> |
| 531120 | Lessors of Nonresidential Buildings (except Miniwarehouses) |
| 531130 | Lessors of Miniwarehouses and Self Storage Units |
| 531190 | Lessors of Other Real Estate Property |
| 531210 | Offices of Real Estate Agents and Brokers* |
| 531312 | Nonresidential Property Managers |
| 531320 | Offices of Real Estate Appraisers* |
| 531390 | Other Activities Related to Real Estate |
| 532000 | <i>Rental and Leasing Services</i> |
| 532111 | Passenger Car Rental |
| 532112 | Passenger Car Leasing |

*Note: evidence of State or other licensing is required in order to be classified in this industry, if applicable.

California Unified Certification Program
List of NAICS Codes (partial)

| | |
|---------------|--|
| 532120 | Truck, Utility Trailer, and RV (Recreational Vehicle) Rental and Leasing |
| 532210 | Consumer Electronics and Appliances Rental |
| 532299 | All Other Consumer Goods Rental |
| 532310 | General Rental Centers |
| 532411 | Commercial Air, Rail, and Water Transportation Equipment Rental and Leasing |
| 532412 | Construction, Mining and Forestry Machinery and Equipment Rental and Leasing |
| 532420 | Office Machinery and Equipment Rental and Leasing |
| 532490 | Other Commercial and Industrial Machinery and Equipment Rental and Leasing |
| 533110 | Lessors of Nonfinancial Intangible Assets (except Copyrighted Works) |
| 540000 | Professional, Scientific and Technical Services |
| 541110 | Offices of Lawyers* |
| 541191 | Title Abstract and Settlement Offices |
| 541199 | All Other Legal Services |
| 541211 | Offices of Certified Public Accountants* |
| 541213 | Tax Preparation Services* |
| 541214 | Payroll Services |
| 541219 | Other Accounting Services |
| 541310 | Architectural Services* |
| 541320 | Landscape Architectural Services* |
| 541330 | Engineering Services* |
| 541340 | Drafting Services |
| 541340 | Map Drafting |
| 541350 | Building Inspection Services |
| 541360 | Geophysical Surveying and Mapping Services* |
| 541370 | Surveying and Mapping (except Geophysical) Services* |
| 541380 | Testing Laboratories |
| 541410 | Interior Design Services |
| 541420 | Industrial Design Services |
| 541430 | Graphic Design Services |
| 541490 | Other Specialized Design Services |
| 541511 | Custom Computer Programming Services |
| 541512 | Computer Systems Design Services |
| 541513 | Computer Facilities Management Services |
| 541519 | Other Computer Related Services |
| 541611 | Administrative Management and General Management Consulting Services |
| 541612 | Human Resources and Executive Search Consulting Services |
| 541613 | Marketing Consulting Services |
| 541614 | Process, Physical Distribution and Logistics Consulting Services |
| 541618 | Other Management Consulting Services |
| 541620 | Environmental Consulting Services |
| 541690 | Other Scientific and Technical Consulting Services |
| 541710 | Research and Development in the Physical, Engineering, and Life Sciences |
| 541720 | Research and Development in the Social Sciences and Humanities |
| 541810 | Advertising Agencies |
| 541820 | Public Relations Agencies |
| 541830 | Media Buying Agencies |
| 541840 | Media Representatives |
| 541850 | Display Advertising |
| 541860 | Direct Mail Advertising |
| 541870 | Advertising Material Distribution Services |

| | |
|---------------|---|
| 541890 | Other Services Related to Advertising |
| 541910 | Marketing Research and Public Opinion Polling |
| 541922 | Commercial Photography |
| 541930 | Translation and Interpretation Services |
| 541990 | All Other Professional, Scientific and Technical Services |
| 550000 | Management of Companies and Enterprises |
| 551111 | Offices of Bank Holding Companies |
| 551112 | Offices of Other Holding Companies |
| 560000 | Administrative and Support Services |
| 561000 | Administrative and Support Services |
| 561110 | Office Administrative Services |
| 561210 | Facilities Support Services |
| 561210 | Base Maintenance |
| 561310 | Employment Placement Agencies |
| 561320 | Temporary Help Services |
| 561330 | Employee Leasing Services |
| 561410 | Document Preparation Services |
| 561421 | Telephone Answering Services |
| 561422 | Telemarketing Bureaus |
| 561431 | Private Mail Centers |
| 561439 | Other Business Service Centers (including Copy Shops) |
| 561440 | Collection Agencies |
| 561450 | Credit Bureaus |
| 561491 | Repossession Services |
| 561492 | Court Reporting and Stenotype Services |
| 561499 | All Other Business Support Services |
| 561510 | Travel Agencies |
| 561520 | Tour Operators |
| 561599 | All Other Travel Arrangement and Reservation Services |
| 561611 | Investigation Services |
| 561612 | Security Guards and Patrol Services* |
| 561613 | Armored Car Services |
| 561621 | Security Systems Services (except Locksmiths) |
| 561622 | Locksmiths |
| 561710 | Exterminating and Pest Control Services* |
| 561720 | Janitorial Services |
| 561730 | Landscaping Services* |
| 561740 | Carpet and Upholstery Cleaning Services |
| 561790 | Other Services to Buildings and Dwellings |
| 561910 | Packaging and Labeling Services |
| 561920 | Convention and Trade Show Organizers |
| 561990 | All Other Support Services |
| 562000 | Waste Management and Remediation Services |
| 562111 | Solid Waste Collection |
| 562112 | Hazardous Waste Collection* |
| 562119 | Other Waste Collection |
| 562211 | Hazardous Waste Treatment and Disposal* |
| 562219 | Other Nonhazardous Waste Treatment and Disposal |
| 562910 | Remediation Services |
| 562910 | Environmental Remediation Services |
| 562920 | Materials Recovery Facilities |
| 562998 | All Other Miscellaneous Waste Management Services |
| 610000 | Educational Services |
| 611410 | Business and Secretarial Schools |
| 611420 | Computer Training |
| 611430 | Professional and Management Development Training |
| 611512 | Flight Training |

*Note: evidence of State or other licensing is required in order to be classified in this industry, if applicable.

California Unified Certification Program
List of NAICS Codes (partial)

| | |
|---------------|--|
| 611513 | Apprenticeship Training |
| 611519 | Other Technical and Trade Schools |
| 611630 | Language Schools |
| 611691 | Exam Preparation and Tutoring |
| 611692 | Automobile Driving Schools |
| 611699 | All Other Miscellaneous Schools and Instruction |
| 611710 | Educational Support Services |
| 620000 | Health Care and Social Assistance* |
| 621000 | <i>Ambulatory Health Care Services</i> |
| 621110 | Offices of Physicians |
| 621210 | Offices of Dentists |
| 621310 | Offices of Chiropractors |
| 621320 | Offices of Optometrists |
| 621330 | Offices of Mental Health Practitioners (except Physicians) |
| 621340 | Offices of Physical, Occupational and Speech Therapists and Audiologists |
| 621391 | Offices of Podiatrists |
| 621399 | Offices of All Other Miscellaneous Health Practitioners |
| 621410 | Family Planning Centers |
| 621420 | Outpatient Mental Health and Substance Abuse Centers |
| 621492 | Kidney Dialysis Centers |
| 621493 | Freestanding Ambulatory Surgical and Emergency Centers |
| 621498 | All Other Outpatient Care Centers |
| 621511 | Medical Laboratories |
| 621512 | Diagnostic Imaging Centers |
| 621610 | Home Health Care Services |
| 621910 | Ambulance Services |
| 621999 | All Other Miscellaneous Ambulatory Health Care Services-- |
| 622000 | <i>Hospitals</i> |
| 623000 | <i>Nursing and Residential Care Facilities</i> |
| 624000 | <i>Social Assistance</i> |
| 624110 | Child and Youth Services |
| 624120 | Services for the Elderly and Persons with Disabilities |
| 624190 | Other Individual and Family Services |
| 624210 | Community Food Services |
| 624221 | Temporary Shelters |
| 624229 | Other Community Housing Services |
| 624230 | Emergency and Other Relief Services |
| 624310 | Vocational Rehabilitation Services |
| 624410 | Child Day Care Services |
| 710000 | Arts, Entertainment and Recreation |
| 711000 | Performing Arts, Spectator Sports and Related Industries |
| 712000 | Museums, Historical Sites and Similar Institutions |
| 713000 | Amusement, Gambling and Recreation Industries |
| 720000 | Accommodation and Food Services |
| 721000 | <i>Accommodation</i> |
| 722000 | <i>Food Services and Drinking Places</i> |
| 722110 | Full-Service Restaurants |
| 722211 | Limited-Service Restaurants |
| 722212 | Cafeterias |
| 722213 | Snack and Nonalcoholic Beverage Bars |
| 722310 | Food Service Contractors |
| 722320 | Caterers |
| 722330 | Mobile Food Services |
| 722410 | Drinking Places (Alcoholic Beverages) |

| | |
|---------------|---|
| 810000 | Other Services |
| 811000 | <i>Repair and Maintenance</i> |
| 811111 | General Automotive Repair |
| 811112 | Automotive Exhaust System Repair |
| 811113 | Automotive Transmission Repair |
| 811118 | Other Automotive Mechanical and Electrical Repair and Maintenance |
| 811121 | Automotive Body, Paint and Interior Repair and Maintenance |
| 811122 | Automotive Glass Replacement Shops |
| 811191 | Automotive Oil Change and Lubrication Shops |
| 811192 | Car Washes |
| 811198 | All Other Automotive Repair and Maintenance |
| 811211 | Consumer Electronics Repair and Maintenance |
| 811212 | Computer and Office Machine Repair and Maintenance |
| 811213 | Communication Equipment Repair and Maintenance |
| 811219 | Other Electronic and Precision Equipment Repair and Maintenance |
| 811310 | Commercial and Industrial Machinery and Equipment (except Automotive and Electronic) Repair and Maintenance |
| 811411 | Home and Garden Equipment Repair and Maintenance |
| 811412 | Appliance Repair and Maintenance |
| 811420 | Reupholstery and Furniture Repair |
| 811430 | Footwear and Leather Goods Repair |
| 812000 | <i>Personal and Laundry Services</i> |
| 812320 | Drycleaning and Laundry Services (except Coin-Operated) |
| 812331 | Linen Supply |
| 812332 | Industrial Launderers |
| 812921 | Photo Finishing Laboratories (except One-Hour) |
| 812922 | One-Hour Photo Finishing |
| 812930 | Parking Lots and Garages |
| 813000 | <i>Religious, Grantmaking, Civic, Professional and Similar Organizations</i> |

The following internal codes are not NAICS codes, and are to be used only by Airport Concessionaires

| | |
|---------------|---|
| 999xxx | Airport Concessions |
| 999000 | Airport Concessionaire - Food and Beverage |
| 999001 | Airport Concessionaire - Book Stores |
| 999002 | Airport Concessionaire - Auto Rental |
| 999003 | Airport Concessionaire - Banks |
| 999004 | Airport Concessionaire - Hotels and Motels |
| 999005 | Airport Concessionaire - Insurance Machines and Counters |
| 999006 | Airport Concessionaire - Gift, Novelty, and Souvenir Shop |
| 999007 | Airport Concessionaire - Newstands |
| 999008 | Airport Concessionaire - Shoe Shine Stands |
| 999009 | Airport Concessionaire - Barber Shops |
| 999010 | Airport Concessionaire - Automobile Parking |
| 999011 | Airport Concessionaire - Jewelry Store |
| 999012 | Airport Concessionaire - Advertising |
| 999013 | Airport Concessionaire - Luggage Cart |
| 999014 | Airport Concessionaire - Nail Salons |
| 999015 | Airport Concessionaire - Private Mail Centers |

CALIFORNIA UNIFIED CERTIFICATION PROGRAM (CUCP)



Roster of Certifying Agencies

Note: If you received this information on hard copy, the California Unified Certification Program Application Package is available on the website at http://www.dot.ca.gov/hq/bep/business_forms.htm.

If the firm has its principal place of business in another state and is currently certified in that state, please contact the California Department of Transportation in the Northern Cluster.

| <i>Southern Cluster</i> | | |
|--|--|---|
| Area | Counties | Certifying Agencies |
| Riverside, Imperial & San Diego (RIS) | Imperial Riverside San Diego | <p>CITY OF SAN DIEGO Equal Opportunity Contracting Program 1010 Second Avenue, #500 San Diego, CA 92101 Phone: (619) 533-4492 Fax: (619) 533-4474 www.sandiego.gov</p> <p>AIRPORT CONCESSIONS ONLY: SAN DIEGO COUNTY REGIONAL AIRPORT AUTHORITY Small Business Development Department P.O. Box 82776 San Diego, CA 92138-2776 Phone: (619) 400-2569 Fax: (619) 400-2566 www.san.org</p> |
| Los Angeles Area | Kern Los Angeles Orange San Bernardino San Luis Obispo Santa Barbara Ventura | <p>CITY OF LOS ANGELES Office of Contract Compliance 600 South Spring St., Suite 1300 Los Angeles, CA 90014 Phone: (213) 847-6480 Fax: (213) 847-5566 www.lacity.org/bca</p> <p>ORANGE COUNTY TRANSPORTATION AUTHORITY (OCTA) Small Business Programs 550 South Main Street P.O. Box 14184 Orange, CA 92863-1584 Phone: (714) 560-5620 Fax: (714) 560-5792 www.octa.net</p> <p>LOS ANGELES COUNTY METROPOLITAN TRANSPORTATION AUTHORITY (METRO) Diversity and Economic Opportunity Department One Gateway Plaza Los Angeles, CA 90012 Phone: (213) 922-2600 Fax: (213) 922-7660 www.mta.net</p> |

* List of agencies subject to change

(Rev. 09.05)

| Northern Cluster | | | |
|-------------------------------------|--|---|--|
| Area | Counties | Certifying Agencies | |
| Bay Area/ Central Valley | Alameda Amador Calaveras Contra Costa Fresno Kings Madera Marin Mariposa Merced Monterey Napa San Benito San Francisco San Joaquin San Mateo Santa Clara Santa Cruz Solano Sonoma Stanislaus Tulare Tuolumne | BART S.F. BAY AREA RAPID TRANSIT DISTRICT (BART) 300 Lakeside Drive 18 th Floor Oakland, CA 94612 Phone: (510) 464-7580 Fax: (510) 464-7587 www.bart.gov CITY OF FRESNO DBE Program 2101 G Street, Building A Fresno, CA 93706 Phone: (559) 621-1182 Fax: (559) 488-1069 www.ci.fresno.ca.us SANTA CLARA VALLEY TRANSPORTATION AUTHORITY (VTA) Small & Disadvantaged Businesses 3331 North First Street San Jose, CA 95134-1906 Phone: (408) 321-5962 Fax: (408) 955-9729 www.vta.org | CENTRAL CONTRA COSTA TRANSIT AUTHORITY (CCCTA) Office of Civil Rights 2477 Arnold Industrial Way Concord, CA 94520-5327 Phone: (925) 676-1976 Fax: (925) 686-2630 www.cccta.org SAN FRANCISCO MUNICIPAL TRANSPORTATION AGENCY (SFMTA) 1 South Van Ness Avenue, 3rd Floor San Francisco, CA 94103 Phone: (415) 701-4443 Fax: (415) 701-4347 www.sfmuni.com SAN MATEO COUNTY TRANSIT DISTRICT (SAMTRANS)/ PENINSULA CORRIDOR JOINT POWERS BOARD (JPB) DBE Office 1250 San Carlos Avenue San Carlos, CA 94070 Phone: (650) 508-7939 Fax: (650) 508-7738 www.samtrans.com AIRPORT CONCESSIONS ONLY: SAN FRANCISCO INTERNATIONAL AIRPORT Airport Minority/Women Opportunity P.O. Box 8097 San Francisco, CA 94128 Phone: (650) 821-5021 Fax: (650) 821-5146 www.flysfo.com |
| Northern California | Alpine Butte Colusa Del Norte El Dorado Glenn Humboldt Inyo Lake Lassen Mendocino Modoc Mono | Nevada Placer Plumas Sacramento Shasta Sierra Siskiyou Sutter Tehama Trinity Yolo Yuba | CALIFORNIA DEPARTMENT OF TRANSPORTATION (CALTRANS) Civil Rights MS 79 1823 14 th Street Sacramento, CA 95814 Phone: (916) 324-1700 or (866) 810-6346 Fax: (916) 324-1862 www.dot.ca.gov YOLO COUNTY TRANSPORTATION DISTRICT (YOLOBUS) DBE Programs 350 Industrial Way Woodland, CA 95776 Phone: (530) 661-0816 Fax: (530) 661-1732 www.yctd.org |